were mentioned in *The Bulletin* of January 6. The Association's efforts in such matters as malpractice suits, legislation, contacts with Government agencies, the press and radio publicity, are of tremendous value to every doctor. If you wish information on a medical subject, a phone call to the Library will bring you the latest articles on the subject by return mail. If this service alone is not worth \$37.50 a year, you are indeed omniscient. These services could not be maintained from dues were it not for the income from the Association's investments and revenue from advertising in *The Bulletin*.

And now, how much have you done to make your Association more useful? Have you ever appeared before the Council to present a constructive plan of any kind? Have you written to any officer to offer helpful suggestions? Or do you limit your correspondence to griping about the dues? Have you ever become a candidate for any office—or wouldn't you care to risk opposition and possible defeat?

Awaiting your reply and assuring you that any suggestions you may have as to ways and means of increasing the Association's usefulness or reducing the expense will be gratefully received and carefully considered, I am

Cordially yours,

THE SECRETARY (E. T. R.).

## Concerning Physician's Responsibility for Work of Office Nurse:

(COPY)

San Francisco, December 23, 1943.

Dear Doctor ———

I duly received your letter of December 18, 1943, regarding the possibility of your head office nurse giving intramuscular and intravenous hypodermic injections under your supervision.

The performance of such procedures by a nurse raises a question of possible unlawful practice of medicine as well as a question of malpractice liability, about which you inquire.

As we have previously advised other physicians in your community, it is our opinion that a registered nurse may properly give intravenous injections under the supervision of a licensed physician and surgeon and that such a procedure would not constitute unlawful practice of medicine. The Business and Professions Code, Section 2726, provides that the license of a registered nurse confers no authority upon the holder to practice medicine or surgery, etc., but it does authorize registered nurses to undertake all necessary procedures to carry out the orders of a doctor of medicine. It is our opinion that giving intravenous therapy by a registered nurse is authorized by this section if done under your supervision.

In the final analysis, in all cases it must be the physician in charge who determines what a nurse shall be permitted to do in a given case. The final responsibility for the result of her action rests upon him and he must be the judge of the extent of her knowledge and experience. The responsibility for any mistake which might be made by your office nurse would rest upon you and you would be liable in a malpractice action for any damage which a patient might suffer through the negligence of your nurse in giving intravenous or intramuscular injections.

In my opinion, the fact alone that your nurse, rather than you, gave an injection would not establish your liability for any damage resulting therefrom, but you would be subject to the usual rules for determining malpractice liability. If the nurse should be negligent and thereby injure some patient, you would be directly responsible.

Very truly yours,

(Signed) HARTLEY F. PEART.

## Concerning a Request for Copies of the October Issue of "California and Western Medicine":

In November, the following notice appeared in the Bulletin of the Los Angeles County Medical Association:

(COPY)

Send Us a Copy—Have you a copy of the October issue of California and Western Medicine that you can spare?

If you have, please send it to the Los Angeles County Medical Association, 1925 Wilshire Boulevard, or leave it at the Secretary's office.

The California Medical Association needs a number of extra copies of that issue.

Thank you.

Among those who returned such copies was Lt. Col. C. R. Castlen, somewhere in the South Pacific. Doctor Castlen's letter follows:

(COPY)

"Somewhere in the South Pacific."

January 16, 1944.

Secretary, Los Angeles County Medical Association 1925 Wilshire Boulevard Los Angeles

This is your October number you request. This journal went a long way; 20,000 miles or thereabouts for maybe 6 cents. Anyway, glad I had one for you.

Sincerely,

CHARLES R. CASTLEN.

Lt. Col. C. R. Castlen, M. C. 117 Sta. Hosp. 1-194089 A. P. A. 929, c/o Postmaster San Francisco, California

## Concerning California Medical Association Donation to Lane Medical Library:

(COPY)

STANFORD UNIVERSITY
OFFICE OF THE PRESIDENT
Stanford University, California,
December 29, 1943.

Dear Mr. Hunton:

Though a most pleasant chain of circumstances has conspired to keep me from the practice of medicine, I am most keenly interested in what was my "first love." Therefore, I am particularly pleased and delighted to see the wonderful support given to our Lane Medical Library Book Fund by the California Medical Association over a period of years. Our cordial thanks for that latest check for \$208, representing the balance of the 1943 contribution. With all good wishes to you and the California Medical Association,

Sincerely yours,

(Signed) DONALD B. TRESIDDER,

President.

Argyll Robertson Pupil.—The factors of heredity and environment both influenced Douglas Argyll Robertson in the choice of his career. His father, a lecturer in surgery, was interested chiefly in ophthalmic surgery; and he studied under the renowned ophthalmicosits, von Graefe. During his thirty-first year, while assistant surgeon in the ophthalmic section of the Royal Infirmary, he wrote papers on the sign which has today made his name almost pathognomonic of syphilis of the central nervous system.—Warner's Calendar of Medical History.